POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	*(signature)*	76331	
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	*(signature)*	JC 886	11-03-ω
RESPONSE FORMALITY REVIEW	114	523	04/05/01

INDEX OF CLAIMS

✔	Rejected		N		Non-elected
=	Allowed		I		Interference
–	(Through numeral)... Canceled		A		Appeal
÷	Restricted		O		Objected

BEST AVAILABLE COPY

Claim			Date
Final	Original		
		04/07	
	1	✔	
	2	✔	
	3	o	
	4	✔	
	5	o	
	6	c	
	7	c	
	8	✔	
	9	✔	
	10	✔	
	11	✔	
	12	✔	
	13	o	
	14	o	
	15	✔	
	16	✔	
	17	✔	
	18	o	
	19	✔	
	20	✔	
	21	o	
	22	c	
	23	✔	
	24	✔	
	25	✔	
	26	o	
	27	✔	
	28	✔	
	29	o	
	30	o	
	31	✔	
	32	✔	
	33	✔	
	34	✔	
	35	✔	
	36	o	
	37	o	
	38	✔	
	39	✔	
	40	c	
	41	✔	
	42	✔	
	43	o	
	44	o	
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Claim		Date
Final	Original	
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If more than 150 claims or 10 actions
staple additional sheet here

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